VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument
State of Alaska
Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

OCT 22 2009

DataMaster cdm S/N 130142

Supervisor/Operator Performing the Verification Procedure:

A

Name Scott E. Gardner ID# 6222 Date 9 Oct 09

Agency Directorate of Emergency Services Phone # 384-3888

Instrument Location Bldg #656, A St, Ft Richardson, AK 99505

B

Alco S/N 78820 Target Value .079 High Pressure 250 psi

Alco Test Values .083 (1st Alco) .083 (2nd Alco)

Signature Scott E Gardner CAB 10/24/09

(OVER)

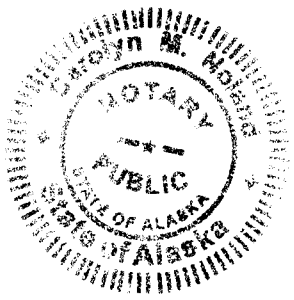
(Do Not write in the area below)

I, Nita J. Bolz, after being first duly sworn, depose and state as follows:
(1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
(2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
(3) I am the Scientific Director of the State Breath Alcohol Program.
(4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
(5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
(6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 16th day of Nov., 2009.

(Notary Seal Stamp)
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office



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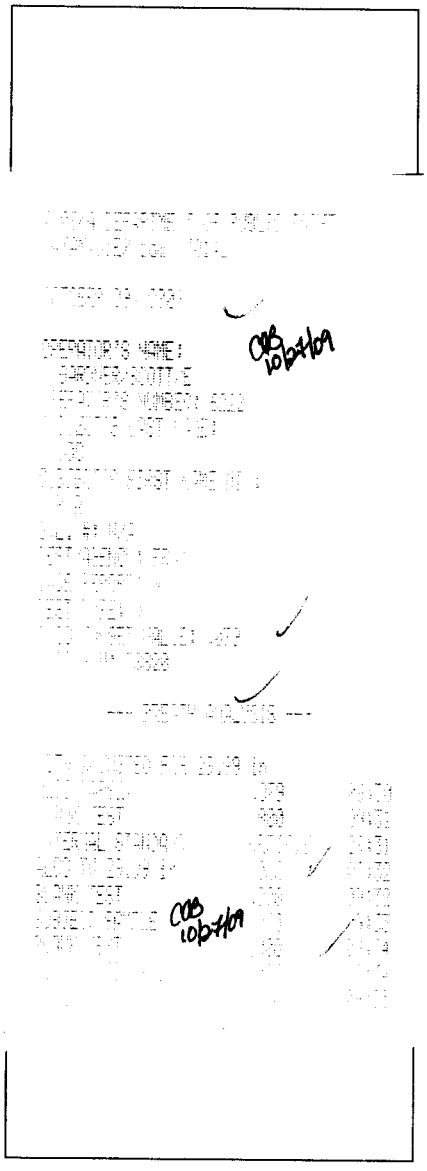
(CONTINUED FROM FRONT PAGE)

C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST



DIAGNOSTIC CHECK